PTO/SB/06 (08-00)
Approved for use through 10/31/2002 OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number														
PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number					
CLAIMS AS FILED PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
FOR		NUMBI	ER FILED		NUMBER EXTRA		RA	ΓE	FEE		RATE	FEE		
	SIC FEE CFR ( 16(a))								s	OR		\$710		
	AL CLAIMS FR 1.16(c))		<b>→</b> minus 20 =		* 0		x \$	=		OR	x \$ =			
IND	EPENDENT CLA	AIMS	3 minus 3 =		* 0		x=			OR	x =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CPR 1 lbid)						+			OR	+ =				
* It the difference in column 1 is less then zero, enter "0" in column 2								ΑL		OR	TOTAL	710		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA:	LLE	NTITY	OR	OTHER T				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RAT	T:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (37 CFR   16(c))	*	Minus	**			x \$	_=		OR	x \$ =			
	Independent (37 CHR   16(b))	*	Minus			=	х =			OR OR	x=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 67 CFR + 166dii						+	_=		OR	+ =			
	(Column 1) (Column 2) (Column 3)					l'OT. Addit. Fi	- 1		OR <sub>A</sub>	TOTAL DDIT. FEE				
AMENDMENT B	. 1	CLAIMS REMAINING AFTER AMENDMENT		NU PREV	CHEST MBER CHOUSLY D FOR	PRESENT EXTRA	RAT	Е	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (37 CFR   16(c))	*	Minus	**		=	x \$	_ =		OR	x \$ =			
	Independent (37 CFR 1 16(b))	*	Minus	***		=	x	_ =		OR OR	x=			
Ì	FIRST PRESENTATION OF MULTIPLE DEP				ENDENT CLAIM (17 (FR ) Indo			_=		OR	+=			
(Column 1) (Column 2) (Column 3)							TO: ADDIT. E			OR Al	TOTAL DDIT, FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA	RAT	Е	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE		
	Total (37 CHR   Total)	*	Minus	**		-	x \$	<del></del>		OR	х <b>\$</b>			
	Independent (37 CFR ± 16(b))	*	Minus	***		=	x	_ =		OR OR	x =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR + 166d))							=		OR	+ =			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL ADDIT. FEE ADDIT. FEE														

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - P (Column 1					ımn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS						A Section	Г	RATE	FEE	OR	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	<i>QC</i> minus 20=		*			X\$ 9=		OR	X\$18=	
INC	EPENDENT CL	AIMS	ر minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT					•		F	. 105			.070	
* If the difference in column 1 is less than zero, ente					r "0" in (	column 2	L	+135=		OR OR	+270=	
		LAIMS AS A		•				TOTAL			TOTAL	(+10
		(Column 1)	MICINDE	(Colu		(Column 3)		SMALL ENTITY			OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN <sup>-</sup>	T CLAIN		-	+135=			+270=	
							L	TOTAL		OR	TOTAL	
		(Caluman 4)		/O-I	O\	(C=1,= 0)	Al	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS			HEST	(Column 3)	Г		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	Αl	DDIT. FEE			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST BER	PRESENT EXTRA	I	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X40=			X80=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM	1 🔲	<b>│</b> ├	740-		OR		
	If the entry in colu	mn 1 is less than ti	ne entry in cal	umn 2 write	e "O" in c	olumn 3	L	+135=		OR	+270=	
**	If the "Highest Nu	mber Previously P mber Previously P	aid For IN TH	IS SPACE	is less tha	an 20, enter "20."	A[	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		nber Previously Pa					er foun	d in the ann	ropriate box	cin co	lumn 1.	